FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

,							
	OMB APPROVAL						
	OMB Number:	3235-0076					
	Expires:	May 31, 2005					
	Estimated average burden						

hours per response 16.00

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Prefix		Serial	
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Name of Offering (check if this is an amendment and name has changed, and indicate change.) R.M. Crowe Finance I, LLC	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE 0508813
A. BASIC IDENTIFICATION DATA	03000
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
R.M. Crowe Finance I, LLC	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
5944 Luther Lane, Suite 501, Dallas, Texas 75225	(214) 369-6192
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
The issuer will loan all of the net proceeds of this offering to RMC Acquisition Vehicle 2005, LLC, its wholly of investment	wned subsidiary, for real estate acquisition and PROCESSED
	ase specify): OCT 2 0 2005
Actual or Estimated Date of Incorporation or Organization: Month Year	ted THOMSON FINANCIAL

GENERAL INSTRUCTIONS

Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Promoter Check Box(es) that Apply: Beneficial Owner Executive Officer Director General and/or Managing Partner R.M. Crowe Property Holdings Company, LP Full Name (Last name first, if individual) 5944 Luther Lane, Suite 501, Dallas, Texas 75225 Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Crowe, R. Maurice Jr. Full Name (Last name first, if individual) 5944 Luther Lane, Suite 501, Dallas, Texas 75225 Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer General and/or Director Managing Partner Erhart, Barbara A. Full Name (Last name first, if individual) 5944 Luther Lane, Suite 501, Dallas, Texas 75225 Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: **Executive Officer** Promoter Beneficial Owner General and/or Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner **Executive Officer** Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner **Executive Officer** General and/or Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner **Executive Officer** General and/or Director Managing Partner Full Name (Last name first, if individual)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Business or Residence Address (Number and Street, City, State, Zip Code)

					B. INF	ORMATIC	ON ABOU	T OFFER	ING					
1.	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							Yes	No ⊠					
	Answer also in Appendix, Column 2, if filing under ULOE.							Ц						
2.	What is	the minim	um investn	nent that w	ill be acce	pted from	any indivi	dual?		••••		\$ 25,000.00		
		. .	,									Yes	No	
3.			permit joint	•								\boxtimes		
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.														
Ful	l Name (I	ast name	first, if indi	vidual)									· ······	
	xon, Micha													
			Address (N		Street, Cit	y, State, Z	ip Code)							
			ongwood, FL											
	pire Financ		oker or Bee	.iiCi										
			Listed Has	Solicited	or Intends	to Solicit I	urchasers							
	(Check	"All States	" or check i	individual	States)				***************************************		•••••	All States		
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID	
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО	
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA	
	RI	SC	SD	TN	TX.	UT	VT	VA	WA	WV	WI	WY	PR	
Ful	ll Name (Last name	first, if indi	vidual)				· · · · · · · · · · · · · · · · · · ·						
	nders, Jeffre		·											
Bu	siness or	Residence	Address (N	lumber and	Street, Ci	ty, State, 2	Zip Code)							
			430, Boca R		132									
Em	pire Financ	cial Group												
Sta	ites in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	urchasers				, <u>.</u>			
	(Check	"All State	s" or check	individua	l States)							All	States	
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	N/	GA	HI	D	
	IL	ĪN	IA	KS	KY	ĪA	ME	MD	MA	MI	MN	MS	MO	
	MT	NE	NV	NH	LKA	NM	NY	NC	ND	ОH	OK	OR	PA	
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR	
Fu	ll Name (first, if indi											
	sinoss or	Dasidanaa	Address O	Trans ban and	Street C	to State 1	7in Codo)				 -			
ρu	Business or Residence Address (Number and Street, City, State, Zip Code)													
Name of Associated Broker or Dealer														
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers														
(Check "All States" or check individual States)							States							
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID	
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO	
MT NE NV NH NJ NM NY NC ND OH OK							OK	OR	PA					
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and					
	already exchanged.		Aggregate		An	nount Already
	Type of Security	C	ffering Pric	е		Sold
	Debt	\$	10,000,000.0	0	\$	125,000.00
	Equity	 \$		_	\$	
	Common Preferred					
	Convertible Securities (including warrants)	\$		_	\$	
	Partnership Interests	\$			\$	
	Other (Specify)	<u> </u>		_	<u> </u>	
	Total				\$	125,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.			_		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."					Aggregate
			Number Investors			ollar Amount of Purchases
	Accredited Investors			3	\$ _	125,000.00
	Non-accredited Investors	_		_	\$_	
	Total (for filings under Rule 504 only)		·····	3	\$	125,000.00
	Answer also in Appendix, Column 4, if filing under ULOE.					
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.					
	Type of Offering		Type of Security		D	ollar Amount Sold
	Rule 505	_	- 		\$_	
	Regulation A				. \$	
	Rule 504				. \$_	····
	Total	_			. \$_	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees				\$	
	Printing and Engraving Costs				\$	
	Legal Fees			$\bar{\Box}$	\$	
	Accounting Fees				\$	
	Engineering Fees		·		\$	
	Sales Commissions (specify finders' fees separately)			\boxtimes	\$	700,000.00
	Other Expenses (identify) Other broker-dealer fees			\boxtimes	s	295,000.00
	Total			X	<u>\$</u>	995,000.00

	C: OFFERING PRICE, NUM	BER OF INVESTORS, EXPENSES AND USE OF F	ROCEEDS	
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."	Question 4.a. This difference is the "adjusted gross		\$ 9,005,000.00
5.	Indicate below the amount of the adjusted gross pro each of the purposes shown. If the amount for any check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross		
	<i>,</i>		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees			□ ¢
	Purchase of real estate	•		□ \$
	Purchase, rental or leasing and installation of mac	hinery		□\$
	Construction or leasing of plant buildings and fa	•	— ·————	□ *
	Acquisition of other businesses (including the val offering that may be used in exchange for the asset issuer pursuant to a merger)	ue of securities involved in this ets or securities of another		□ \$
	Repayment of indebtedness	·		□s
	Working capital	•		□ \$
	Other (specify): Bridgeloan or equity to affiliate to pur	rchase commercial real estate	\$ 8,605,000.00	
		····	s	
	Column Totals		\$ 9,005,000.00	\$
	Total Payments Listed (column totals added)		⊠ \$9	0,005,000.00
		D. FEDERAL SIGNATURE		
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	nish to the U.S. Securities and Exchange Commis	ssion, upon writte	
Iss	uer (Print or Type)	Signature	Date	
R.1	M. Crowe Finance I, LLC	Maruera C. That	October 3, 2005	
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)		
Ва	rbara A. Erhart	Vice President		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)